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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Lauren Boebert For Congress Po Box 752 ADDRESS (number and street) (Check if address is changed) Rifle 81652 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tmoose@hdafec.com (Check if address is changed) Optional Second E-Mail Address llisker@hdafec.com COMMITTEE'S WEB PAGE ADDRESS (URL) LaurenBoebertForCongress.com (Check if address is changed) DATE 2022 C00728238 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. McCauley, Mike, , , Type or Print Name of Treasurer McCauley, Mike, , , [Electronically Filed] 01 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below	w.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	emplete the candidate
Name of Candidate Boebert, Lauren, , ,	
Candidate Party Affiliation REP Office Sought: House Senate President	State CO District 03
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Biotriot
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its c	onnected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2.	
3. FEC ID number	
4.	

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Write or Type Committee Nam	ne	
Lauren Boeber	t For Congress	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Lo	eadership PAC Sponsor
Team Boebert Joint F Mailing Address	P.O. Box 752	1611 ZIP CODE Leadership PAC Sponsor
	entify by name, address (phone number optional) and position of the person	
Full Name McCauley Mailing Address	y, Mike, , , 370 East South Temple Salt Lake City UT 8	4111-1206
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	
 Treasurer: List the name ar any designated agent (e.g., 	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name McCauley of Treasurer	/, Mike, , ,	
Mailing Address		
	Salt Lake City UT 82	4111-1206 _
Title on Decition	CITY STATE	ZIP CODE
Title or Position Treasurer	385 Telephone number	

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Full Name of Designated	McCauley, Mike, , ,	
Agent		
Mailing Address	370 East South Temple	
	Salt Lake City	UT 84111-1206
	CITY ST.	TATE ZIP CODE
Title or Position Designated Age	ent Telephone number	r 385 – 202 – 7284
Banks or Other	r Depositories: List all banks or other depositories in which the committee of	deposits funds, holds accounts, rents
safety deposit be	oxes or maintains funds.	,
safety deposit be Name of Bank,	oxes or maintains funds.	
safety deposit be	Depository, etc.	
safety deposit be	oxes or maintains funds.	
safety deposit be	Depository, etc. Alpine Bank 100 E 4th Street	
safety deposit b Name of Bank,	Depository, etc. Alpine Bank 100 E 4th Street	
safety deposit b Name of Bank,	Depository, etc. Alpine Bank 100 E 4th Street	CO 81650
safety deposit b Name of Bank,	Depository, etc. Alpine Bank 100 E 4th Street Rifle	
safety deposit b Name of Bank,	Depository, etc. Alpine Bank 100 E 4th Street Rifle CITY ST	CO 81650
safety deposit b Name of Bank, Mailing Address	Depository, etc. Alpine Bank 100 E 4th Street Rifle CITY ST	CO 81650
safety deposit be Name of Bank, Mailing Address Mame of Bank,	Depository, etc. Alpine Bank 100 E 4th Street Rifle CITY ST Depository, etc. Capitol Bank 2275 Research Boulevard	CO 81650
safety deposit b Name of Bank, Mailing Address	Depository, etc. Alpine Bank 100 E 4th Street Rifle CITY ST Depository, etc. Capitol Bank 2275 Research Boulevard	CO 81650
safety deposit be Name of Bank, Mailing Address Mame of Bank,	Depository, etc. Alpine Bank 100 E 4th Street Rifle CITY ST Depository, etc. Capitol Bank 2275 Research Boulevard Suite 600	CO 81650

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Take Back the Ho	ouse 2022		
Mailing Address	P.O. Box 30844		
	Bethesda	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	cories: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
VAIN DUTINE BU	EBERT VICTORY FUND		
Mailing Address	PO BOX 341027		
Mailing Address			
	AUSTIN	, TX	78734
Relationship:	CITY A	STATE A	ZIP CODE A
		0	0022 _
Connecte	Affiliated Committee	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
connected Agent: Identification Full Name		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identif	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
resignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
resignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
resignated Agent: Identification of the Full Name Mailing Address TITLE OR POSITION Canks or Other Depositor	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
resignated Agent: Identification of the properties of the properti	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
resignated Agent: Identification of Bank, Wells	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
resignated Agent: Identification of Bank, Wells	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
resignated Agent: Identification of Bank, prepository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Fargo	STATE A	ZIP CODE A
resignated Agent: Identification of Bank, prepository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Fargo	STATE A	ZIP CODE A